**ANNEX 1**

**73rd CISM GA and Congress 2018 - PRELIMINARY ENTRY**

**TO BE RETURNED BY 25th JANUARY 2018**

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| **To** | Colonel Delio Colon - CISM Delegate  Circulo Deportivo de las Fuerzas Armadas y Policía Nacional  Villa Olimpica, Av las Americas  Santo Domingo Este R.D.  DOMIICAN REPUBLIC  Phone : (1-809) 519 76 39 / 481 05 50  Fax : (1-809) 597 95 53  Email:[deliocolon@gmail.com](mailto:deliocolon@gmail.com)//[cidefaipon2010@hotmail.com](mailto:cidefaipon2010@hotmail.com) | **&** | CISM Headquarters  Rue Jacques Jordaens, 26B  1000 Brussels, Belgium.  Tel: 0032-2-647-6852  Fax: 0032-2-647-5387  E-mail: [cism@cism-milsport.com](mailto:cism@cism-milsport.com) |

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| **Nation:** | | | |  | | | | | |
| **CONFIRMATION of the participants** | | | | | | | | | |
| **#** | **Rank** | | **Name** | | | | **Function** | | **Passport No.** |
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| **CONFIRMATION of the Hotel requirements for the participants - please specify the type of room and beds in case of double / triple occupancy:**  **single – double twin – double king size bed – triple** | | | | | | | | | |
| **#** | **Rank** | | **Name** | | | | **Type of room** | | **nr of occupants** |
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| Visa | | Mastercard | | | Diners Club | American Express | | Number | |
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| **Point of contact at the CISM Delegation for all issues related to the 73rd CISM GA and Congress** | |
| **Rank** |  |
| **Name** |  |
| **Function** |  |
| **Mobile phone** |  |
| **Email address** |  |

**Date**

**Rank, name and signature of the Chief of Delegation**

**Official stamp (if any)**

**ANNEX 2 // PART 1**

**73rd CISM GA and Congress 2018 – FINAL ENTRY**

**TO BE RETURNED BY 15th MARCH 2018**

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| --- | --- | --- | --- |
| **To** | Colonel Delio Colon - CISM Delegate  Circulo Deportivo de las Fuerzas Armadas y Policía Nacional  Villa Olimpica, Av las Americas  Santo Domingo Este R.D.  DOMIICAN REPUBLIC  Phone : (1-809) 519 76 39 / 481 05 50  Fax : (1-809) 597 95 53  Email:[deliocolon@gmail.com](mailto:deliocolon@gmail.com)//[cidefaipon2010@hotmail.com](mailto:cidefaipon2010@hotmail.com) | **&** | CISM Headquarters  Rue Jacques Jordaens, 26B  1000 Brussels, Belgium.  Tel: 0032-2-647-6852  Fax: 0032-2-647-5387  E-mail: [cism@cism-milsport.com](mailto:cism@cism-milsport.com) |

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| **Nation:** | | | |  | | | | | |
| **CONFIRMATION of the participants** | | | | | | | | | |
| **#** | **Rank** | | **Name** | | | | **Function** | | **Passport No.** |
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| **CONFIRMATION of the Hotel requirements for the participants - please specify the type of room and beds in case of double / Triple occupancy:**  **single – double twin – double king size bed - triple** | | | | | | | | | |
| **#** | **Rank** | | **Name** | | | | **Type of room** | | **nr of occupants** |
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| **Credit Card Type** | | | | | | | | **Card information** | |
| Visa | | Mastercard | | | Diners Club | American Express | | Number | |
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| Expiration date: | |
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| **Point of contact at the CISM Delegation for all issues related to the 68th CISM GA and Congress** | |
| **Rank** |  |
| **Name** |  |
| **Function** |  |
| **Mobile phone** |  |
| **Email address** |  |

**Date**

**Rank, name and signature of the Chief of Delegation**

**Official stamp (if any)**

**ANNEX 2 // PART 2**

**73rd CISM GA and Congress 2018**

**FLIGHT INFORMATION OF THE PARTICIPANTS**

**TO BE RETURNED BY 15th MARCH 2018**

|  |  |  |  |
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| **To** | Colonel Delio Colon - CISM Delegate  Circulo Deportivo de las Fuerzas Armadas y Policía Nacional  Villa Olimpica, Av las Americas  Santo Domingo Este R.D.  DOMIICAN REPUBLIC  Phone : (1-809) 519 76 39 / 481 05 50  Fax : (1-809) 597 95 53  Email:[deliocolon@gmail.com](mailto:deliocolon@gmail.com)//[cidefaipon2010@hotmail.com](mailto:cidefaipon2010@hotmail.com) | **&** | CISM Headquarters  Rue Jacques Jordaens, 26B  1000 Brussels, Belgium.  Tel: 0032-2-647-6852  Fax: 0032-2-647-5387  E-mail: [cism@cism-milsport.com](mailto:cism@cism-milsport.com) |

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| **Nation:** |  |

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| **ARRIVALS - Flight Information** | | | |
| **Name:** | **Date** | **Time** | **Flight Number** |
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| **DEPARTURES - Flight Information** | | | |
| **Name:** | **Date** | **Time** | **Flight Number** |
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| **Point of contact at the CISM Delegation for all issues related to the 71st CISM GA and Congress** | |
| **Rank** |  |
| **Name** |  |
| **Function** |  |
| **Mobile phone** |  |
| **Email address** |  |

**Date**

**Rank, name and signature of the Chief of Delegation**

**Official stamp (if any)**